

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. underneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

RELAXIN-LIKE FACTOR AND METHODS AND USES THEREOF

the specification of which is attached hereto and includes amendments filed of even date herewith unless one of the following boxes is checked:
☒ the specification was filed in the United States on June 7, 1995 as Application Serial No. _____ (for declaration not accompanying application)
with amendment(s) filed on _____ (if applicable)

☐ the specification was filed as PCT international application Serial No. _____ on _____ and was amended under PCT Article 19 on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED PRIOR TO THE FILING DATE OF THE APPLICATION			
APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORITY CLAIMED
			YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

APPLICATION NUMBER	FILING DATE

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION SERIAL NO.	FILING DATE	STATUS		
		PATENTED	PENDING	ABANDONED

POWER OF ATTORNEY: As a named inventor, I hereby appoint S. Leslie Misrock (Reg. No. 18872), Harry C. Jones, III (Reg. No. 20280), Berj A. Terzian (Reg. No. 20060), Gerald J. Flintoft (Reg. No. 20823), David Weild, III (Reg. No. 21094), Jonathan A. Marshall (Reg. No. 24614), Barry D. Rein (Reg. No. 22411), Stanton T. Lawrence, III (Reg. No. 25736), Isaac Jarkovsky (Reg. No. 22713), Joseph V. Colaianni (Reg. No. 20019), Charles E. McKenney (Reg. No. 22795), Philip T. Shannon (Reg. No. 24278), Francis E. Morris (Reg. No. 24615), Charles E. Miller (Reg. No. 24576), Gidon D. Stern (Reg. No. 27469), John J. Lauter, Jr. (Reg. No. 27814), Brian M. Poissant (Reg. No. 28462), Brian D. Coggio (Reg. No. 27624), Rory J. Radding (Reg. No. 28749), Stephen J. Harbulak (Reg. No. 29166), Donald J. Goodell (Reg. No. 19766), James N. Palik (Reg. No. 25510), Thomas E. Friebe (Reg. No. 29258), Laura A. Coruzzi (Reg. No. 30742), Jennifer Gordon (Reg. No. 30753), Jon R. Stark (Reg. No. 30111), Allan A. Fanucci (Reg. No. 30256), Geraldine F. Baldwin (Reg. No. 31232), Victor N. Balancia (Reg. No. 31231), Albert P. Halluin (Reg. No. 25227), and Marcia H. Sundeen (Reg. No. 30893), whose address is Pennie & Edmonds, 1155 Avenue of the Americas, New York, New York 10036, and David Lowin (Reg. No. 29,326) whose address is Connective Therapeutics, Inc., 3400 West Bayshore Road, Palo Alto, California, 94303, and each of them, my attorneys, to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith.

TEMP-39089

SEND CORRESPONDENCE TO: PENNIE & EDMONDS 1155 AVENUE OF THE AMERICAS NEW YORK, N.Y. 10036-2711						DIRECT TELEPHONE CALLS TO: PENNIE & EDMONDS DOCKETING (212) 790-2803	
201	FULL NAME OF INVENTOR	LAST NAME Schwabe	FIRST NAME Christian	MIDDLE NAME			
	RESIDENCE & CITIZENSHIP	CITY Charleston	STATE OR FOREIGN COUNTRY South Carolina	COUNTRY OF CITIZENSHIP U.S.A.			
	POST OFFICE ADDRESS	STREET 126 Baufine Street	CITY Charleston	STATE OR COUNTRY South Carolina	ZIP CODE 29401		
202	FULL NAME OF INVENTOR	LAST NAME Unemori	FIRST NAME Elaine	MIDDLE NAME			
	RESIDENCE & CITIZENSHIP	CITY Oakland	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.			
	POST OFFICE ADDRESS	STREET	CITY Oakland	STATE OR COUNTRY California	ZIP CODE		
203	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME			
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP			
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE		
204	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME			
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP			
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE		
205	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME			
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP			
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE		
206	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME			
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP			
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 <i>Christian Schwabe</i>	SIGNATURE OF INVENTOR 202 <i>Elaine Unemori</i>	SIGNATURE OF INVENTOR 203
DATE 7/31/95	DATE 6/28/95	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: :
Schwabe, et al. :
Serial No: 08/484,219 : Group Art Unit: Not Yet Assigned
Filed: June 7, 1995 : Examiner: Not Yet Assigned
For: RELAXIN-LIKE FACTOR AND METHODS AND USES THEREOF

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
[37 CFR 1.9(d) and 1.27(c)] - SMALL BUSINESS CONCERN

I declare that I am an official of the small business concern empowered to act on behalf of the concern, Connective Therapeutics, Inc., having an address at 3400 West Bayshore Road, Palo Alto, CA 94303.

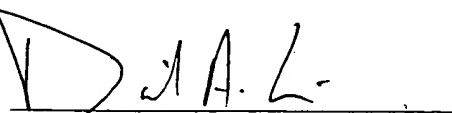
I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates does not exceed 500 persons. I hereby declare that rights to the above-identified invention, have been conveyed (under contract or law) to and remain with Connective Therapeutics, Inc.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). [*NOTE: Separate verified statements are required from each named person concern or organization having rights in the invention averring to their status as small entities. (37 CFR 1.27)]

NAME: Medical University of South Carolina
ADDRESS: 171 Ashley Avenue, Charleston, SC 29425
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☒ NONPROFIT ORGANIZATION

I acknowledge the duty to file in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. [37 CFR 1.28(b)]

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of this application or any patent issuing thereon.



David A. Lowin
Vice President, Intellectual Property
and Chief Patent Counsel
CONNECTIVE THERAPEUTICS, INC.
3400 West Bayshore Road
Palo Alto, California 94303

9/18/95
Date

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Schwabe, et al.

Serial No: 08/484,219 : Group Art Unit: Not Yet Assigned
Filed: June 7, 1995 : Examiner: Not Yet Assigned
For: RELAXIN-LIKE FACTOR AND METHODS AND USES THEREOF

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
[37 CFR 1.9(e) and 1.27(d)] - NONPROFIT ORGANIZATION

I declare that I am an official empowered to act on behalf of the nonprofit organization identified below

NAME OF ORGANIZATION: Medical University of South Carolina
ADDRESS 171 Ashley Avenue, Charleston, South Carolina 29425

TYPE OF ORGANIZATION: University

I hereby declare that the above-identified nonprofit organization qualifies as a nonprofit organization as defined in 37 CFR 1.9(e), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, and that rights to the above-identified invention, have been conveyed (under contract or law) to and remain with the above-identified nonprofit organization.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). [*NOTE: Separate verified statements are required from each named person concern or organization having rights in the invention averring to their status as small entities. (37 CFR 1.27)]

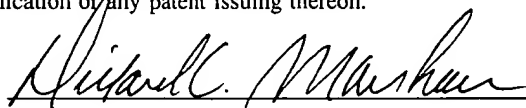
NAME: Connective Therapeutics, Inc.
ADDRESS: 3400 West Bayshore, Palo Alto, CA 94303
☐ INDIVIDUAL ☒ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

NAME:
ADDRESS:
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. [37 CFR 1.28(b)]

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of this application or any patent issuing thereon.

SIGNATURE:



DATE: 09/15/95

NAME OF PERSON SIGNING:

Dillard C. Marshall

TITLE IN ORGANIZATION:

Director, Research Administration

ADDRESS:

Medical University of South Carolina
171 Ashley Avenue
Charleston, SC 29425